



ADULT SOFTBALL REGISTRATION PACKET 2012 FALL

Walk-in Registration

Parks, Recreation & Cultural Affairs Administrative office
1792 County Services Pkwy., Marietta, GA 30008

RETURNING TEAMS: (*Teams that participated in a 2011 FALL league*)

TUESDAY JULY 10 6 PM – 8 PM

NEW TEAMS: (*Teams that did not participate in a 2010 FALL league*)

THURSDAY JULY 12 6 PM – 8 PM

- **NEW TEAMS MUST REGISTER IN PERSON**
- The cost is \$400.00 for a 10-game season
- ONE team check or money order should be made payable to CCPRCAD (Cobb Parks, Recreation & Cultural Affairs Department). We also accept VISA and MASTERCARD payments. Cash payments must be in exact amount

↓ **RETURNING TEAMS** – Early Registration Options ↓

GUIDELINES FOR EARLY REGISTRATION

- Must be a returning team from the FALL 2011 leagues (SPRING teams are not considered returning)
- Must be registering for the same park and league (Transferring teams must come in to register)

ON-LINE REGISTRATION

- On-line registration opens **the week of July 1st** at www.cobbcounty.org/parks
- Must pay by either Visa or MasterCard.

Please contact your league coordinator to get your required PIN # and Log-in ID.

MAIL-IN REGISTRATION

Mail to:

***All mailed entries must be received by July 9, 2012**

**CCPRCAD
Adult Athletics
1792 County Services Pkwy
Marietta, Ga. 30008**

MAIL-IN CHECK LIST

- ✓ Entry Form – Filled out in its entirety including the manager and assistant managers requested contact information.
- ✓ Check or Money Order payable to CCPRCAD (\$400.00). Payment must accompany the registration form.
- ✓ Drivers License number on the check.

Registration

The **total registration fee** is due at time of registration, partial payments will not be accepted and due to county policy no checks may be held. If for any reason your team is not accepted a full refund will be made immediately.

Make **checks payable to CCPRCAD** (Cobb County Parks, Recreation and Cultural Affairs Department). Checks returned unpaid by the bank will be charged a **\$25.00 fee**. We also accept VISA and MasterCard.

The **enclosed entry form** must be filled out COMPLETELY and turned in at the time of registration. The team's roster must be submitted by the first game of the season.

Returning teams that fail to register prior to the new team registration date will lose their guaranteed spot in the league.

League and/or location transfers will be handled on a first-come, first-served basis.

Schedule conflicts must be submitted at registration. We **do not** guarantee that all conflict requests will be honored.

A \$200 **non-residency fee** will be charged to any team that does not meet the residency requirements. (75% of players reside in, or team sponsored by a business located in, Cobb County.)

Registration fees are 100% refundable when the department cancels the activity. A team wishing to withdraw from a league that has not been cancelled by the department must provide a written request at least seven days before the scheduled start of the league. They may receive 100% credit to the team's/organizations account or may request a refund. Within the week prior to the scheduled start of a league refund/credits will not be given except for verified medical/hardship cases. Refunds for payment made by cash or check will be received approximately 30 days after the refund is requested.

Season

LEAGUE PLAY – All Monday – Thursday leagues will begin the week of August 6. Friday leagues may start on August 3.

GAME TIMES – Games will be scheduled to begin as early as 6:30 p.m. and as late as 9:30 p.m. The number of teams in each league will determine start time. Most leagues will play once or twice weekly.

GENERAL INFORMATION - The Department will furnish softballs, umpires and scorekeepers for all games. Each team must furnish its own numbered shirts, gloves and bats.

ADA - It is the intent of Cobb County Government to comply with the Americans with Disabilities Act. If you or anyone on your team has a specific physical or service accessibility need please make our staff aware so that we may make a reasonable effort to accommodate your needs.

IMPORTANT INFORMATION

- **The schedule will be emailed no later than 5pm, July 31st.**
- **The schedules will also be posted on our web sight www.cobbcounty.org/parks**

EARLY REGISTRATION INFORMATION

RETURNING TEAMS ONLY (FROM FALL 2011)

➤ **ONLINE REGISTRATION - Early online registration dates; July 1 - 9, 2012.**

To register your team online you must first contact your league coordinator and get your Login ID and Pin #.

➤ **You must register for the same league that you played in for Fall 2011.**

➤ **Please have the following information ready when registering:**

1. Log-in ID and PIN #
2. League code from the registration packet or contact your league coordinator.
3. Visa or Master Card # and expiration date

➤ **How to register:**

1. Go to our department website at www.prca.cobbcountyga.gov
2. Click on the **Online Registration** web link on the side bar
3. Click on the activities tab
4. Type in the league code in the barcode box or select desired search criteria from the pull down menu.
5. Select the desired activity or return to the search page
6. Click ADD to put the league into your basket (the first time you do this, you will be asked to enter your client code and Account PIN)
7. Select the team you wish to register and press the UPDATE MY BASKET button
8. Go to the CHECK OUT button to pay for your team
9. Review the charges and enter payment information as required. Press the complete transaction button.
10. For your confirmation, please print the registration was successful page.
11. **Fax the completed entry form from this packet to your league coordinator.**

Fax numbers:

- Bishop Complex: 770.528.8887
 - Nickajack: 770.528.8814
 - Kennworth: 770.528.8898
 - Bells Ferry & Terrell Mill: 770.591.3163
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**DETERMINATION OF RESIDENCY FOR
COBB COUNTY TEAMS
(APPLIES TO ALL TEAMS)**

OPEN LEAGUE - The team roster must be 75% Cobb County residents. A resident shall be defined as a person that lives in, or attends school full-time in Cobb County. If the team sponsor is located within Cobb County, then the team is considered a resident team.

CHURCH LEAGUE - The church should be located in Cobb County; if the church is located outside of the boundaries of Cobb County, then 75% of the participants on the church roster must live or attend school full-time in Cobb County.

PLAYERS ON ROSTER REQUIREMENT	NUMBER OF COBB COUNTY PLAYERS NECESSARY TO MEET MINIMUM
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8 -----	6
9 -----	7
10 -----	8
11 -----	9
12 -----	9
13 -----	10
14 -----	11
15 -----	12
16 -----	12
17 -----	13
18 -----	14
19 -----	15
20 -----	15
21 -----	16
22 -----	16
23 -----	17
24 -----	18
25 -----	19

NOTE:

A \$200.00 PER TEAM NON-RESIDENCY FEE WILL BE ADDED TO ALL TEAMS THAT DO NOT MEET THE 75% RESIDENCY REQUIREMENT.

LEAGUE GUIDELINES

CHURCH LEAGUE - The roster must be made up of individuals who are active members or minister approved regular attendees of the church or an organization of the church which they represent other than an athletic team. A player must be 16 years old to be eligible for church teams.

OPEN LEAGUE - The roster is not restricted to individuals who work or attend church together and is open to any group of individuals. A player must be 16 years old to be eligible for open teams.

COED LEAGUE - Same requirements as open league teams on roster and age. In coed play at least 50% of the players on the field must be females at all times.

DIVISIONS - Denotations of Major, Competitive and Recreation indicate relative strengths of the leagues at a given location. The Major has a 5 home run limit, Competitive has a 3 home limit and Recreation is a 1 home run rule. Excess home runs are ruled as outs in the Major and Competitive divisions, and as inning-ending outs in the Recreation division.

GAME TIMES - Leagues will have game times of 6:30 p.m., 7:30 p.m., 8:30 p.m., and 9:30 p.m. or 7:00 p.m., 8:00 p.m., and 9:00 p.m. and distributed as evenly as possible. The number of teams in each league will determine start time.

PRACTICE - No practices will be assigned for fall league.

GENERAL INFORMATION - The department will furnish softballs, umpires and scorekeepers for all games. Each team must furnish its own numbered shirts, gloves and bats.

2012 ADULT FALL SOFTBALL LEAGUE

PLAYING LOCATIONS, DAYS, FEES & LEAGUE COORDINATORS

BELLS FERRY PARK League Coordinators – Michael Gates						Michael.gates@cobbcounty.org
	BARCODE	# OF GAMES	DAYS PLAYED	FEES	CONTACT/PHONE #	
MEN'S COMPETITIVE BLUE (3HR)	55336	10	MONDAY	\$400	770 591-3160	
COED COMPETITIVE (3HR)	55337	10	TUESDAY	\$400	770 591-3160	
MEN'S COMPETITIVE RED (3HR)	55338	10	THURSDAY	\$400	770 591-3160	

BISHOP COMPLEX		League Coordinator – Brooks Tinsley		Brooks.tinsley@cobbcounty.org	
	BARCODE	# OF GAMES	DAYS PLAYED	FEES	CONTACT/PHONE #
MEN'S RECREATION RED (1HR)	55311	10	MON,WED	\$400	770 528-8860
MEN'S COMPETITIVE RED (3HR)	55312	10	MON,WED	\$400	770 528-8860
COED COMPETITIVE RED (3HR)	55315	10	MON,WED	\$400	770 528-8860
COED RECREATION RED (1HR)	55317	10	MON,WED	\$400	770 528-8860
MEN'S RECREATION BLUE (1HR)	55314	10	MON,WED	\$400	770 528-8860
MEN'S COMPETITIVE BLUE (3HR)	55313	10	MON,WED	\$400	770 528-8860
COED RECREATION WHITE (1HR)	55316	10	MON,WED	\$400	770 528-8860
COED RECREATION BLUE (1HR)	55318	10	MON,WED	\$400	770 528-8860
MEN'S RECREATION GOLD (1HR)	55321	10	TUE,THUR	\$400	770 528-8860
MEN'S COMPETITIVE GOLD (3HR)	55319	10	TUE,THUR	\$400	770 528-8860
WOMEN'S COMP GOLD (3HR)	55324	10	TUE,THUR	\$400	770 528-8860
COED RECREATION GOLD (1HR)	55325	10	TUE,THUR	\$400	770 528-8860
MEN'S COMPETITIVE SILVER (3HR)	55320	10	TUE,THUR	\$400	770 528-8860
COED COMPETITIVE GOLD (3HR)	55322	10	TUE,THUR	\$400	770 528-8860
MEN'S RECREATION SILVER (1HR)	55326	10	TUE,THUR	\$400	770 528-8860
MEN'S CHURCH COMP SILVER (3HR)	55323	10	TUE,THUR	\$400	770 528-8860

2012 ADULT FALL SOFTBALL LEAGUE

PLAYING LOCATIONS, DAYS, FEES & LEAGUE COORDINATORS

KENNWORTH PARK League Coordinator – Kim Cammons Kim.cammons@cobbcounty.org					
	BARCODE	# OF GAMES	DAYS PLAYED	FEES	CONTACT/PHONE #
MEN'S COMPETITIVE BLUE (3HR)	55331	10	<u>MON</u> , FRI	\$400	770 528-8896
MEN'S CHURCH COMP (3HR)	55328	10	<u>TUE</u> , FRI	\$400	770 528-8896
MEN'S COMP RED (3HR)	55327	10	<u>TUE</u> , FRI	\$400	770 528-8896
COED COMPETITIVE (3HR)	55330	10	<u>WED</u> , FRI	\$400	770 528-8896
FRIDAY MEN'S COMP (3HR)	55329	10	THUR, <u>FRI</u>	\$400	770 528-8896
NOTE: PRIMARY NIGHT PLAYED IS UNDERLINED					

NICKAJACK PARK League Coordinator – Derrell Walker Derrell.walker@cobbcounty.org					
	BARCODE	# OF GAMES	DAYS PLAYED	FEES	CONTACT PHONE #
MEN'S COMP BLUE (3HR)	55340	10	<u>TUE</u> , FRI	\$400	770 528-8823
MEN'S COMP RED (3HR)	55342	10	<u>WED</u> , FRI	\$400	770 528-8823
COED COMP GOLD (3HR)	55343	10	<u>THUR</u> , FRI	\$400	770 528-8823
NOTE: PRIMARY NIGHT PLAYED IS UNDERLINED					

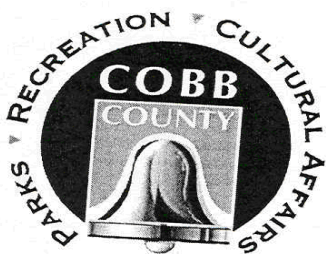
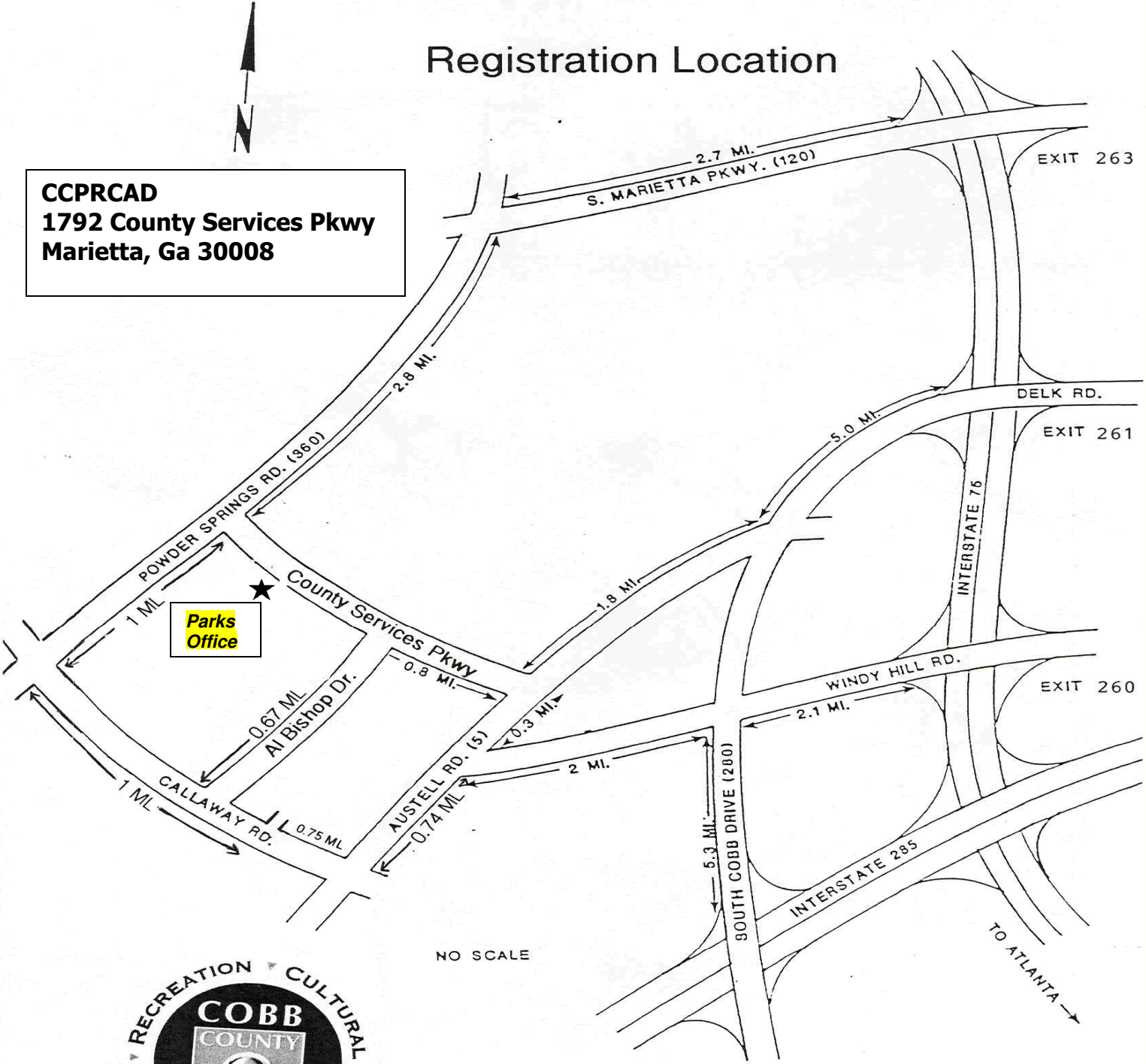
TERRELL MILL PARK League Coordinators – Andrea Raiford Andrea.raiford@cobbcounty.org					
	BARCODE	# OF GAMES	DAYS PLAYED	FEES	CONTACT PHONE #
MEN'S MAJOR (5HR)	55332	10	<u>TUE</u> , FRI	\$400	770 591-3160
COED COMPETITIVE (3HR)	55333	10	<u>WED</u> , FRI	\$400	770 591-3160
MEN'S COMPETITIVE RED (3HR)	55334	10	<u>THUR</u> , FRI	\$400	770 591-3160
MEN'S COMPETITIVE BLUE (3HR)	55335	10	<u>THUR</u> , FRI	\$400	770 591-3160
NOTE: PRIMARY NIGHT PLAYED IS UNDERLINED					

ALL LEAGUES WILL PLAY A 10-GAME SCHEDULE.

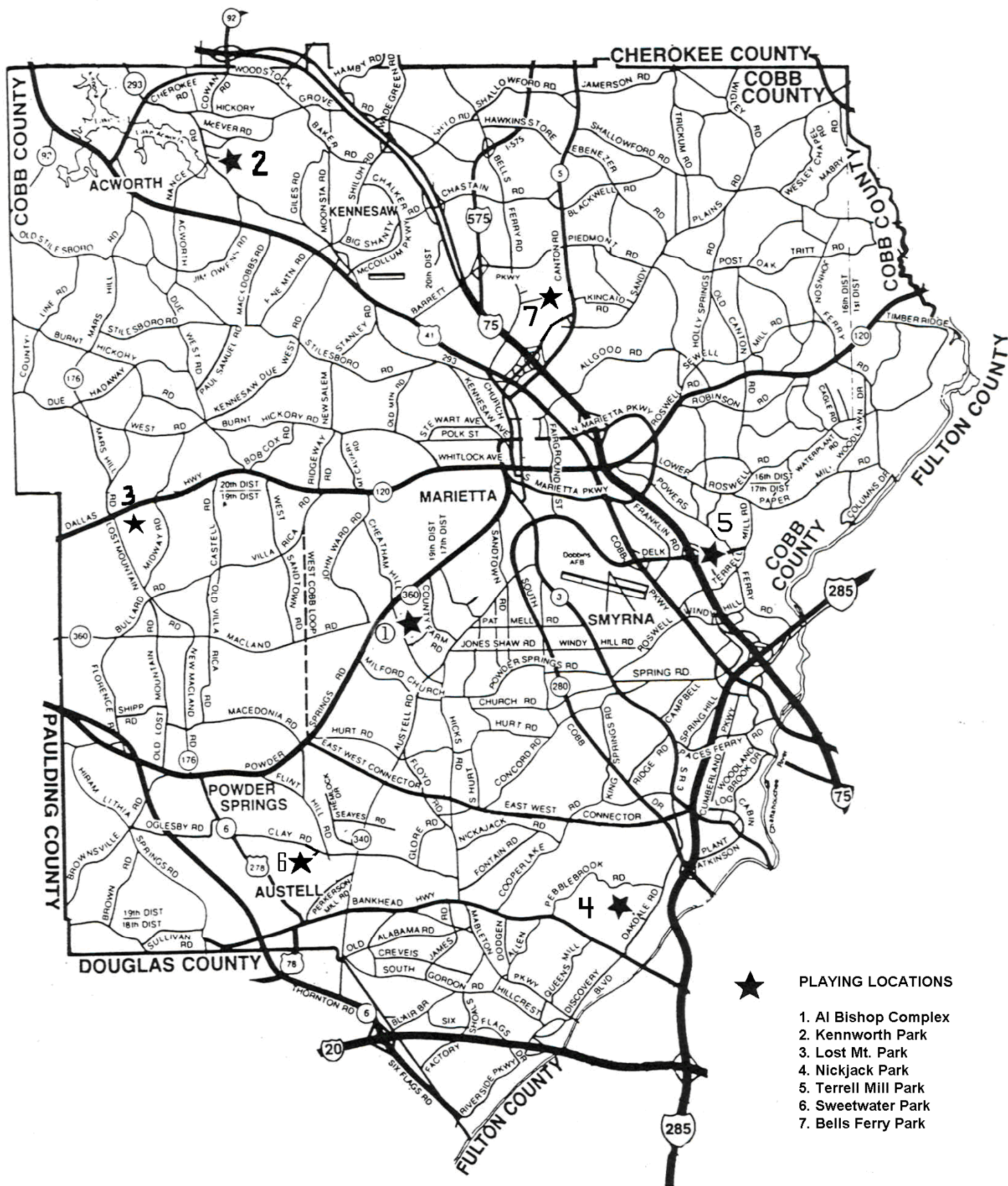
ALL LEAGUES (EXCEPT AL BISHOP) ARE SUBJECT TO MAKE-UP GAMES ON FRIDAY NIGHTS.

Registration Location

CCPRCAD
1792 County Services Pkwy
Marietta, Ga 30008



COBB COUNTY PARKS



2012 ADULT FALL SOFTBALL LEAGUE ENTRY FORM

CHECK ONE:**RETURNING TEAM TO SAME LEAGUE****NEW TEAM****RESIDENT TEAM****RETURNING TEAM REQUESTING TRANSFER****NON-RESIDENT TEAM**

Team Name: _____ Park/League Last Year: _____

Team Name Last Year: _____ E-Mail Address: _____

Manager * _____ Cell Phone* _____ Work Phone* _____

Address.* _____
Street/Apt # _____ City _____ State _____ Zip _____ Home Phone* _____

Asst. Mgr.* _____ Cell Phone* _____ Work/ Home * _____

Third Contact:* _____ Cell Phone* _____ Work/ Home * _____

* THIS INFORMATION MUST BE COMPLETE BEFORE YOUR REGISTRATION CAN BE ACCEPTED. PLEASE REMEMBER TO INCLUDE APARTMENT NUMBERS.

NOTE: ALL OPEN LEAGUE SLOTS WILL BE CONSIDERED HELD BY THE MANAGER, ALL CHURCH LEAGUE SLOTS HELD BY THE CHURCH, AND ALL INDUSTRIAL SLOTS HELD BY THE COMPANY UNLESS YOU INDICATE OTHERWISE BELOW: ____ MANAGER ____ CHURCH ____ SPONSOR/COMPANY

LEAGUE INFORMATION

Returning teams to same league check line for last year's league.

Returning teams requesting transfer place number (1) next to first preference, (2) next to second, etc.

New teams place number (1) next to first preference, (2) next to second choice, etc.

AL BISHOP	BC#
MEN'S REC RED (M, W)	55311
MEN'S COMP RED (M, W)	55312
COED COMP RED (M, W)	55315
COED REC. RED (M, W)	55317
MEN'S REC BLUE (M, W)	55314
MEN'S COMP B LUE (M, W)	55313
COED REC BLUE (M, W)	55318
COED REC WHITE (M, W)	55316
MEN'S REC GOLD (T, TH)	55321
MEN'S COMP GOLD ((T,TH)	55319
WOMEN'S COMP GOLD (T,TH)	55324
COED REC GOLD (T, TH)	55325
MEN'S COMP SILVER (T,TH)	55320
COED COMP GOLD (T,TH)	55322
MEN'S REC SILVER (T,TH)	55326
MEN'S CH COMP GOLD (T,TH)	55323

BELLS FERRY	BC#
MEN'S COMP BLUE	55336
COED COMP	55337
MEN'S COMP RED	55338

NICKAJACK	BC#
MEN'S COMP BLUE	55340
MEN'S COMP RED	55342
COED COMP GOLD	55343

KENNWORTH	BC#
MEN'S COMP RED	55331
MEN'S CHURCH COMP	55328
FRI MEN'S COMP	55327
COED COMP	55330
MEN'S COMP BLUE	55329

TERRELL MILL	BC#
MEN'S MAJOR	55332
COED COMP	55333
MEN'S COMP RED	55334
MEN'S COMP BLUE	55335

AMOUNT DUE: \$400.00 AMOUNT PAID: _____ VISA OR MasterCard Check #: _____ DATE: _____

PAYING WITH A CHECK REQUIRES A DRIVER'S LICENSE #

MAKE ONE (1) CHECK PAYABLE TO CPCRCD - WE ACCEPT VISA & MASTERCARD

2012 OFFICIAL SOFTBALL ROSTER

TEAM NAME _____ LEAGUE/PARK: _____ MANAGER OR MINISTER SIGNATURE _____
 DIVISION: MEN'S _____ WOMEN'S _____ COED _____ CHURCH _____ RESIDENT TEAM _____ NON-RESIDENT _____

The following players will represent my team in the 2012 Fall Adult Softball League. These players have agreed to abide by the agreement on the reverse side of this roster, all the rules as outlined in the Constitution and By-laws governing the league, and all policies set up by the Cobb County Recreation Commission. I also understand that if this roster is found to be illegal that this team will be immediately dropped from the league with no refund.

RELEASE AND HOLD HARMLESS AGREEMENT PERMISSION TO PROVIDE EMERGENCY MEDICAL TREATMENT

Realizing the nature of this program, its physical demands and how important it is to follow rules, regulations, and instructions outlined by the staff of the Cobb County Parks, Recreation and Cultural Affairs Department, I am, to the best of my knowledge, in good health and able to participate in the program. I authorize the staff of the Cobb County Parks, Recreation and Cultural Affairs Department to organize any required medical or first aid procedure, or to take the undersigned to a hospital emergency room for treatment. If any treatment is required.

The Undersigned hereby forever releases, discharges, and covenants to hold harmless the Cobb County Parks, Recreation and Cultural Affairs Department, the Cobb County recreation Commission, the Cobb Arts Commission, the Cobb County Board of Commissioners and Cobb County, Georgia and any other person, firm, or corporation charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors, and assignees from any and all claims, demands, damages, costs, expenses, loss of services, actions and causes of action belonging to the undersigned or arising out of any act or occurrence in connection with and particularly on account of all personal injury disability, property damage, loss of damages of any kind sustained or that may hereafter be sustained arising out of the matters described herein or in consequence of the participation in the recreation program sponsored by the Cobb County Parks, Recreation and Cultural Affairs Department. The undersigned hereby bind their heirs, administrators, executors and successors. Further, this Agreement shall apply to all unknown and unanticipated injuries and damages directly or indirectly resulting here-from. This Release and Hold Harmless Agreement shall constitute a full and complete release of any and all claims.

* - SIGNATURE OF PARENT REQUIRED FOR PERSONS UNDER 18 YEARS OF AGE.

AGE	NAME (PLEASE PRINT)	HOME ADDRESS (Street, City, State, Zip)	WHAT COUNTY DO YOU RESIDE IN & DO YOU PAY CITY & COUNTY TAXES?	SIGNATURE
1.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
2.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
3.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
4.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
5.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
6.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
7.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	

Team Name: _____

Park & League: _____

AGE	NAME (PLEASE PRINT)	HOME ADDRESS (Street, City, State, Zip)	WHAT COUNTY DO YOU RESIDE IN & DO YOU PAY CITY & COUNTY TAXES?	SIGNATURE
8.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
9.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
10.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
11.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
12.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
13.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
14.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
15.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
16.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
17.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
18.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	

Team Name: _____ Park & League: _____

AGE	NAME (PLEASE PRINT)	HOME ADDRESS (Street, City, State, Zip)	WHAT COUNTY DO YOU RESIDE IN & DO YOU PAY CITY & COUNTY TAXES?	SIGNATURE
19.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
20.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
21.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
22.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
23.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
24.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
25.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
ROSTER LIMIT – 25 (USE BOTTOM 3 TO REPLACE ORIGINAL PLAYERS AFTER THE LIMIT)				
1.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
2.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
3.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	

NOTE Players must be present to be added to this roster. All players are subject to I.D. checks if requested by the park supervisor/scorekeeper.